02/22/2016 13 : 04

PAGE 1/2

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

,			
 (a) Name of Individual, Organization or Corporation Gun Owners of America, Inc. 			
(b) Address (number and street) check if different than pre 8001 Forbes Place, Suite 102	eviously reported		
(c) City, State and ZIP Code		3. FEC Identification Number	
Springfield VA 22151-2205			
2. Occupation and Name of Employer (for Individual Filers Only)		C C90011693	
4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? No 5. COVERING PERIOD: FROM THROUGH	≥ 24-Hour Report 48-Hour Report Yes, it amends the report filed on		
TOTAL CONTRIBUTIONS 7. TOTAL INDEPENDENT EXPENDITURES		0.00	
7. TOTAL INDEL LINDLINE EAFTENDITURES		3222.08	
Under penalty of perjury I certify that the independent expenditures reported herei of, any candidate or authorized committee or agent of either, or any political par		, or concert with, or at the request or suggestion	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE [El	DATE ectronically Filed]	
Walter J. Olson	Walter J. Olson	02/22/2016	
NOTE: Submission of false, erroneous or incomplete information	n may subject the person signing this report t	o the penalties of 2 U.S.C. §437g.	

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 2 FOR LINE 7 OF FORM 5

ME OF FILER (In Full)					
un Owners of America, Inc.					
E !! No / First Middle Initial\ of I					
Full Name (Last, First, Middle Initial) of F	ayee		Date of Public I	Distribution/Dissemination	
Voice Broadcasting			M M /	19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1527 S. Cooper Street				للنتا لتنا	
			Amount		
City	State	Zip Code		3222.08	
Arlington	TX	76010	Transaction ID): F57.4332	
Purpose of Expenditure		Category/ 004	Office Sought:	House State: TX	
Robo calls		Type 004		Senate District:08	
Name of Federal Candidate Supported of	or Opposed by Expend	liture:		President President	
Steve Toth		Check One:	Support Oppose		
			Disbursement For:	Primary General	
Calendar Year-To-Date Per Election for Office Sought		3222.08	Other (specify)		
			Officer (shee	<u> </u>	
Full Name (Last, First, Middle Initial) of I	Payee		Date of Public Distribution/Dissemination		
			M = M /	D D / Y Y Y Y Y	
Mailing Address				لحجما لحا	
			Amount		
City	State	Zip Code			
		•			
Purpose of Expenditure		Catagony	Office Sought:	House State:	
Fulpose of Experiencie		Category/ Type	Office Gought.	Senate State:	
Name of Federal Candidate Supported of	- Opposed by Evpend			District:	
Name of Federal Candidate Supported C	r Opposed by Expend	liture.	Check One:	Support Oppose	
Calendar Year-To-Date Per Election			Disbursement For:	Primary General	
for Office Sought			Other (spec	ify) ▶	
Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination			
			M M /	D D / Y Y Y Y	
Mailing Address					
Walling / laa. 555			Amount		
City	Ctoto	Zin Cada	Amount		
City	State	Zip Code			
		T			
Purpose of Expenditure		Category/	Office Sought:	House State:	
		Type		Senate District:	
Name of Federal Candidate Supported of	or Opposed by Expend	liture:		President	
			Check One:	Support Oppose	
Calendar Year-To-Date Per Election		Disbursement For:	Primary General		
for Office Sought			Other (spec	ifv)	
				··· [/]	
(a) SUBTOTAL of Itemized Independent	Expenditures			2222.00	
a) SOBTOTAL OF ROTHERON MASPONAGIN.	_xponditures		•	3222.08	
(E) SUPTOTAL of Unitomized Independen	at Evacaditurae				
(b) SUBTOTAL of Unitemized Independen	TExperiorures		···· >		
(c) TOTAL Independent Expenditures (carry total from last page forward)			>	3222.08	